

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
		105007607142		1-800-899-1038	002205091 GBF	
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)				
SY Koor tuit		WIND RIVER COMMUNITY				
Generator's Phone: 508 962-7111		MAY 01/20				
6. Transporter 1 Company Name		U.S. EPA ID Number				
CYN OIL CORPORATION		MAD082303777				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address		U.S. EPA ID Number				
CYN OIL CORPORATION, 1771 WASHINGTON STREET, STOUGHTON, MA 02072						
Facility's Phone: 781-341-5108		MAD082303777				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
1.	STATE REGULATED OIL WASTE	001	TT	200	G	MA98
2.						
3.						
4.						
14. Special Handling Instructions and Additional Information						
24 HOUR EMERGENCY SPILL RESPONSE 800-899-1038 D.O.T. EMERGENCY GUIDE #128						
PASSED DEXSIL						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name		Signature		Month Day Year		
DEAN GORE				10 26 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month Day Year		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator)		U.S. EPA ID Number				
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)		Month Day Year				
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year		



181. 1-800-699-1030
OUTSIDE MA 1-781-344-0265
1771 Washington St., P.O. Box 119
Stoughton, MA 02072

Nº 199050

EPA No. MAD 082303777

Check No. _____

Date 10/26/13

LIC. NOS. MA-40 TNH 0019. VT
CT-HW-28. RI 315. ME-HWT 84023

Received from Wilson Rev Co Environmental

Address S4 KNOX HILL Acton

QUANTITY	DESCRIPTION <u>REL</u>	AMOUNT
<u>200</u>	USED OIL FOR RECYCLING	\$ <u>150.00</u>
	SPENT ANTIFREEZE FOR RECYCLING	\$
	Total	\$ <u>150.00</u>

Driver X [Signature]

Generator X [Signature]